

## EXHIBIT 9



## 2015-16 BREMERTON SCHOOL DISTRICT COACHING EVALUATION FORM

Name of Coach: Joe Kennedy

Building: BHS

Assignment: Assistant Football Coach

Date: November 20, 2015

**S**   **NI**   Satisfactory   Needs Improvement

### PROFESSIONAL RELATIONSHIPS:

- X   • Cooperates with administration, faculty, and other staff.
- X   • Establishes and maintains positive relations with parents and community.
- X   • Follows school, district, league and WIAA policies.
- X   • Has valid First Aid and CPR card.

### RELATIONSHIPS WITH COACHING ASSOCIATES:

- X   • Maintains positive working relationships with district coaches of the same sport.
- X   • Supports and cooperates with other sports and activity programs.
- N/A   • **Head Coach** - Plans, organizes, and delegates responsibility well.
- N/A   • Supports assistant coaches.
- X   • **Assistant Coach** -- Actively involved, works with other coaches.
- X   • Supports head coach.

### COACH - ATHLETE RESPONSIBILITIES:

- X   • Honest and consistent in all relationships and established policies.
- X   • Analyzes the strengths and limitations of athletes.
- X   • Maintains the respect of participants in the program.
- X   • Encourages and assists with academic achievement of participants.
- X   • Supervises team both home and away.
- X   • Maintains professional relationship with officials.
- N/A   • Makes sure all athletes have been properly cleared through the Athletic Director's office, i.e. physical, insurance form/waiver, emergency card, parent permission form, ASB card and eligibility, before allowing athlete to participate in practices.

### COACHING TECHNIQUES:

- X   • Uses sound and accepted teaching techniques and conducts organized practice sessions.
- X   • Participates in off-season conditioning and weight training program for athletes.
- X   • Teaches fundamentals.
- X   • Teaches specific safety procedures for activity.

**S N I Satisfactory Needs Improvement****RELATED RESPONSIBILITIES:**

- N/A \_\_\_\_ •Complies with inventory, equipment care, and storage responsibilities.  
X \_\_\_\_ •Has thorough knowledge of assigned position.  
 \_\_\_\_ •Upgrades knowledge by participating in at least one professional clinic per year.  
N/A \_\_\_\_ •Hands in proper verification for WIAA Coaches Standards reports.  
N/A \_\_\_\_ •**Head Coach** -- files year-end activity report as required.  
N/A \_\_\_\_ •Complies with budget and orders equipment in a timely manner.  
N/A \_\_\_\_ •Knows and enforces current district guidelines for transportation of students to school sponsored events. Inform assistant coaches of their responsibilities for team transportation.  
N/A \_\_\_\_ •Applies discipline in a fair, positive manner as outlined in the Student Athletic Handbook, and files discipline reports with the Athletic Director.  
N/A \_\_\_\_ •Cooperates with media and responds to reasonable requests.  
N/A \_\_\_\_ •Holds meetings when appropriate with parents and athletes prior to first contest to establish positive communication.

**SAFETY MEASURES:**

- X \_\_\_\_ •Adheres to efficient and sound program of injury prevention.  
X \_\_\_\_ •When injuries do occur follows prescribed routine and maintains good communications with injured participant.

**GENERAL COMMENTS:**

Mr. Kennedy failed to follow district policy and his actions demonstrated a lack of cooperation with administration. The subsequent situations contributed to negative relations between parents, students, community members, coaches and the school district.

Mr. Kennedy failed to supervise student-athletes after games due to his interactions with media and community. Prior to his public defiance of district directions, Mr. Kennedy had assisted in student supervision. However, most of the season he did not supervise student-athletes after games.

**RECOMMENDATIONS:**

Do Not Rehire...

*Never came in after numerous requests and contacts JB 12/16/15*

\_\_\_\_\_  
 Signature of Coach

(Coach's signature does not indicate agreement with the above evaluation, only recognition that it has been read and discussed).

JBarton  
 Signature of Athletic Director

\_\_\_\_\_  
 Date

12/16/15  
 Date

1/05